

TESTIMONY OF DR. WAYNE HARRIS

VICE PRESIDENT OF THE

**ASSOCIATION OF MINORITY HEALTH
PROFESSIONS SCHOOLS
507 CAPITOL COURT, N.E. – SUITE 200
WASHINGTON, D.C. 20002
(202) 544-7499**

PRESENTED TO THE

**HOUSE APPROPRIATIONS SUBCOMMITTEE ON LABOR,
HEALTH AND HUMAN SERVICES, EDUCATION AND
RELATED AGENCIES**

MARCH 30, 2006

SUMMARY OF FY07 RECOMMENDATIONS

- 1) **\$550 MILLION FOR HRSA'S HEALTH PROFESSIONS TRAINING PROGRAMS , INCLUDING:**
 - **\$34 MILLION FOR MINORITY CENTERS OF EXCELLENCE.**
 - **\$36 MILLION FOR THE HEALTH CAREERS OPPORTUNITY PROGRAM.**
 - **\$47 MILLION FOR SCHOLARSHIPS FOR DISADVANTAGED STUDENTS.**
- 2) **\$83 MILLION FOR HRSA'S HEALTHY COMMUNITIES ACCESS PROGRAM.**
- 3) **5% INCREASE OVERALL FOR THE NATIONAL INSTITUTES OF HEALTH, INCLUDING \$250 MILLION FOR THE NATIONAL CENTER ON MINORITY HEALTH AND HEALTH DISPARITIES.**
- 4) **\$119 MILLION FOR THE NATIONAL CENTER FOR RESEARCH RESOURCES EXTRAMURAL FACILITIES CONSTRUCTION PROGRAM.**
- 5) **\$65 MILLION FOR THE DEPARTMENT OF EDUCATION'S STRENGTHENING HISTORICALLY BLACK GRADUATE INSTITUTIONS PROGRAM.**
- 6) **\$65 MILLION FOR THE HHS OFFICE OF MINORITY HEALTH, INCLUDING SUPPORT FOR A NEW HEALTH DISPARITIES INITIATIVE.**

Mr. Chairman, thank you for the opportunity to present the views of the Association of Minority Health Professions Schools (AMHPS). I am Dr. Wayne Harris, Dean of the College of Pharmacy at the Xavier University of Louisiana.

AMHPS is comprised of the nation's twelve historically black medical, dental, pharmacy, and veterinary schools. Combined, our institutions have graduated 50% of African-American physicians and dentists, 60% of all the nation's African-American pharmacists, and 75% of the African-American veterinarians.

Mr. Chairman, historically black health professions institutions are addressing a pressing national need in carrying out their mission of training minorities in the health professions. While African-Americans represent approximately 15% of the U.S. population, only 2-3% of the nation's health professions workforce is African-American. Studies have demonstrated that when African Americans and other minorities are trained in minority institutions, they are much more likely to: 1) serve in medically underserved areas, 2) care for minorities, and 3) accept patients who are Medicaid dependent or otherwise poor.

This is important Mr. Chairman because the gap in health status between our nation's minority and majority populations continues to widen due in part to the lack of access to quality health care services in minority communities. As a result, we believe it is imperative that the federal commitment to training African Americans and other minorities in the health professions remains strong.

In spite of our proven success in training health professionals, and the important contribution these professionals make, our institutions continue to face a financial struggle inherent to our mission. The financial challenges facing the majority of our students affect our institutions in numerous ways. For example, we are unable to depend on tuition as a means by which to respond to any discontinuation of federal support. Moreover, the patient populations served by the AMHPS institutions are overwhelmingly poor. As a result, our institutions cannot rely on patient care income at a time when the average medical school gets 40-60% of its operating revenue from health care services.

Mr. Chairman, before I go into a discussion of our Association's FY07 recommendations, I would like to share Xavier's experience with Hurricane Katrina and update you on our recovery efforts. Xavier is located in New Orleans and the entire campus was flooded with 3-6 feet of water. Each building on campus had significant damage on the first floor and the campus was shut down until January 9, 2006. The University developed an ambitious plan to repair damage and resume operations on January 17, 2006 using a revised academic calendar to complete the entire academic year in August 2006. I am happy to report that the University resumed classes on January 17 as planned. Overall University enrollment dropped, however, from approximately 4000 students in August 2005 to approximately 3000 students post-Katrina. The College of Pharmacy enrollment was less severely affected with enrollment dropping from 619 to 600.

Significant challenges still remain, including cash flow problems as we deal with recovery costs in the range of \$30 million for construction and equipment and disruption of operations of key health care institutions in New Orleans. These institutions are vital to the clinical education

program of the College of Pharmacy and to our continued recovery. It is absolutely essential to the University that health care delivery services are restored as quickly as possible.

The University recognized the need to resume our academic programs as quickly as possible in order to continue to produce African American health professionals and contribute to rebuilding the City of New Orleans. By working with other Colleges of Pharmacy across the country, we were able to allow senior pharmacy students to continue their clinical education while under evacuation and we are pleased to report that pharmacy students will graduate on May 20, 2006. Our rebuilding effort is well underway but disruption of federal support for important programs such as HRSA'S Center of Excellence would severely hinder this rebuilding effort.

FISCAL YEAR 2007 RECOMMENDATIONS FOR FEDERAL PROGRAMS OF INTEREST TO AMHPS

1) HEALTH RESOURCES AND SERVICES ADMINISTRATION

A) HEALTH PROFESSIONS TRAINING

Mr. Chairman, we are disappointed that the President's budget all but eliminates funding again this year for health professions training programs focused on diversity in the workforce. The health professions training programs administered by the Health Resources and Services Administration are the only federal initiatives designed to address the longstanding under-representation of minority individuals in health careers. HRSA's Minority Centers of Excellence, Health Careers Opportunity Program, and Scholarships for Disadvantaged Students, support health professions institutions with a historic mission and commitment to increasing the number of minorities in the health professions. For FY07, AMHPS joins with the Health Professions Nursing and Education Coalition in recommending an overall funding level of \$550 million for health professions training.

For the health professions programs specifically focused on enhancing minority representation in the health care workforce, AMHPS recommendations are as follows:

Minority Centers of Excellence

The purpose of the Minority Centers of Excellence program (COE) is to assist schools that train minority health professionals by supporting programs of excellence in health professions education at those institutions. The COE program focuses on improving student recruitment and performance; improving curricula and cultural competence of graduates; facilitating faculty/student research on minority health issues; and training students to provide health services to minority individuals by providing clinical teaching at community-based health facilities. *For fiscal year 2007, AMHPS recommends a funding level of \$34 million for Minority Centers of Excellence (an increase of \$22 million over FY06)*

Health Careers Opportunity Program

Grants made to health professions schools and educational entities under the Health Careers Opportunity Program (HCOP) enhance the ability of individuals from disadvantaged backgrounds to improve their competitiveness to enter and graduate from health professions schools. HCOP funds activities that are designed to develop a more competitive applicant pool through partnerships with institutions of higher education, school districts, and other community based entities. HCOP also provides for mentoring, counseling, primary care exposure activities and information regarding careers in a primary care discipline. Sources of financial aid are provided to students as well as assistance in entering into the health professions school. *For fiscal year 2007, AMHPS recommends a funding level of \$36 million for the Health Careers and Opportunities Program (an increase of \$32 million over FY06).*

Scholarships for Disadvantaged Students

The Scholarships for Disadvantaged Students program was established to make scholarship funds available to eligible students from disadvantaged backgrounds who are enrolled (or accepted for enrollment) as full-time students. To be eligible for funding, a school must have in place a program to recruit and retain students from disadvantaged backgrounds (including racial and ethnic minorities) and demonstrate that the program has achieved success based on the number or percentage of disadvantaged students who graduate from the school. *For fiscal year 2007, AMHPS recommends a funding level of \$47 million for the Scholarships for Disadvantaged Students program (an increase of \$47 million over FY07).*

B) HEALTHY COMMUNITIES ACCESS PROGRAM

Mr. Chairman, Congress passed legislation in 2003 to reauthorize the Community Health Centers program. Included in this important measure was a provision which established a demonstration authority within the Healthy Community Access Program to foster greater collaboration between historically black health professions and federally qualified CHC's. Specifically, this provision:

- 1) Establishes a demonstration program for the development of research infrastructure at historically black health professions schools affiliated with federally qualified Community Health Centers.
- 2) Establishes joint and collaborative programs of medical research and data collection between historically black health professions schools and federally qualified Community Health Centers with the goal of improving the health status of medically underserved populations.
- 3) Supports the cost of patient care, data collection, and academic training resulting from these partnerships.

Mr. Chairman, several of our member institutions received funding in FY05 under this promising new demonstration authority. Unfortunately, the H-CAP program was eliminated in the FY06 Labor-HHS bill, and the President's budget for FY07 does not provide any funding for the coming year. *AMHPS encourages the Subcommittee to restore support for this important program in FY07 at the FY05 level of \$83 million.*

2) NATIONAL INSTITUTES OF HEALTH

A) THE NATIONAL CENTER ON MINORITY HEALTH AND HEALTH DISPARITIES

Established in 2000 by the Minority Health and Health Disparities Research and Education Act (Public Law 106-525), the National Center on Minority Health and Health Disparities at NIH is charged with addressing the longstanding health status gap between minority and majority populations. The National Center has the authority to:

- * Directly support biomedical research, training, and information dissemination focused on eliminating health status disparities.
- * Serve in a leadership capacity in developing a comprehensive plan for minority health research at NIH.
- * Participate as an equal when NIH institute and center directors meet to determine research policy.
- * Support the enhancement of biomedical research capacity at minority health professions institutions through a "Research Endowment" program.
- * Support the development of health professions institutions with a history and mission of serving minority and medically underserved communities through a "Centers of Excellence" program.

For fiscal year 2006, AMHPS recommends a funding level of \$250 million for the National Center. This is an increase of \$54 million. This new funding will enable the Center to support all of its new programs and begin to meet the challenge of eliminating health status disparities within minority and medically underserved communities

EXTRAMURAL FACILITIES CONSTRUCTION

Mr. Chairman, if we are to take full advantage of the historic funding increases for biomedical research that Congress has provided to NIH over the past decade, it is critical that our nation's research infrastructure remain strong. The current authorization level for the Extramural Facility Construction program at the National Center for Research Resources is \$250 million. The law also includes a 25% set-aside for "Institutions of Emerging Excellence" (many of which are minority institutions) for funding up to \$50 million. Finally, the law allows the NCRR Director to waive the matching requirement for institutions participating in the program. We strongly support all of these provisions of the authorizing legislation.

Unfortunately, funding for NCRR's Extramural Facility Construction program was completely eliminated in the FY06 Labor-HHS bill. *For FY07, AMHPS encourages the Subcommittee to restore funding for this program to its FY04 level of \$119 million, or at a minimum, provide funding equal to the FY05 appropriation of \$40 million.*

RESEARCH CENTERS IN MINORITY INSTITUTIONS

The Research Centers at Minority Institutions program (RCMI) at the National Center for Research Resources has a long and distinguished record of helping our institutions develop the research infrastructure necessary to be leaders in the area of health disparities research. Although NIH has received unprecedented budget increases in recent years, funding for the RCMI program has not increased by the same rate. *Therefore, AMHPS recommends that funding for this important program grow at the same rate as NIH overall in FY07.*

3) STRENGTHENING HISTORICALLY BLACK GRADUATE INSTITUTIONS - DEPARTMENT OF EDUCATION

The Department of Education's Strengthening Historically Black Graduate Institutions program (Title III, Part B, Section 326) is extremely important to AMHPS institutions. The funding from this program is used to enhance educational capabilities, establish and strengthen program development offices, initiate endowment campaigns, and support numerous other institutional development activities. For FY07, AMHPS recommends an appropriation of \$65 million (an increase of \$7 million over FY06) to continue the vital support that this program provides to historically black graduate institutions.

4) HHS OFFICE OF MINORITY HEALTH

The HHS Office of Minority Health (OMH) has the potential to play a critical role in addressing health status disparities throughout the country. Unfortunately, the office does not currently have the authority or resources necessary to support activities that will truly make a difference in closing the health gap between minority and majority populations. For FY07, AMHPS recommends a funding level of \$65 million for the Office, with \$10 million designated for the following programs focused on medically underserved communities and capacity building for the training of minorities in health professions:

- 1) OMH sponsored programs to assist medically underserved communities with the greatest need in solving health disparities and attracting and retaining health professionals,
- 2) Assistance to minority institutions in acquiring real property to expand their campuses to increase the capacity to train minorities for medical careers;
- 3) Support of conferences for high school and undergraduate students to pursue health professions careers; and
- 4) Support for cooperative agreements with minority institutions for the purpose of strengthening their capacity to train more minorities in the health professions.

Once again, thank you for the opportunity to present the views of the Association of Minority Health Professions Schools. We look forward to working with you in support of these important programs.

House Committee on Appropriations
 Witness Disclosure Requirement - "Truth in Testimony"
 Required by House Rule XI, Clause 2(g)

Your Name: Wayne Harris		
1. Are you testifying on behalf of a Federal, State, or Local Government entity?	Yes	No X
2. Are you testifying on behalf of an entity other than a Government entity?	Yes X	No
3. Please list any federal grants or contracts (including subgrants or subcontracts) which <u>you have received</u> since October 1, 2003: <p align="center">PLEASE SEE ATTACHED C.V. FOR DR. HARRIS</p>		
4. Other than yourself, please list what entity or entities you are representing: <p align="center">ASSOCIATION OF MINORITY HEALTH PROFESSIONS SCHOOLS</p>		
5. If your answer to question number 2 is yes, please list any offices or elected positions held or briefly describe your representational capacity with the entities disclosed in question number 4: <p align="center">VICE PRESIDENT</p>		
6. If your answer to question number 2 is yes, do any of the entities disclosed in question number 4 have parent organizations, subsidiaries, or partnerships to the entities for whom you are not representing?	Yes X	No
7. If the answer to question number 2 is yes, please list any federal grants or contracts (including subgrants or subcontracts) which were received by the entities listed under question 4 since October 1, 2003, which exceed 10% of the entities revenue in the year received, including the source and amount of each grant or contract to be listed: <p align="center">NONE</p>		

NAME		POSITION TITLE	
Harris, Wayne T.		Professor and Dean	
EDUCATION/TRAINING (<i>Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.</i>)			
INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Mercer University, Atlanta, GA	B.S.	1974	Pharmacy
The University of Kansas, Lawrence, KS	M.S.	1977	Medicinal Chemistry
The University of Kansas, Lawrence, KS	Ph.D.	1979	Medicinal Chemistry

Positions and Employment

- 1974-1975 Staff Pharmacist, University of Tennessee, City of Memphis Hospitals, Memphis, TN
- 1975-1979 Graduate Assistant, Department of Medicinal Chemistry, The University of Kansas, Lawrence, KS
- 1979-1980 Senior Research Chemist, Dow Chemical Company, Health and Consumer Products Division, Indianapolis, IN
- 1981-1993 Assistant Professor, Department of Pharmaceutical Sciences, Mercer University School of Pharmacy, Atlanta, GA
- 1993-1998 Associate Professor, Department of Pharmaceutical Sciences, Mercer University School of Pharmacy, Atlanta, GA
- 1998-2001 Professor and Chair, Department of Pharmaceutical Sciences, Hampton University School of Pharmacy, Hampton, VA
- 2001-present Professor and Dean, Xavier University of Louisiana, College of Pharmacy, New Orleans, LA

Ongoing Research Support

1C06RR020556-01 Harris (PI) 09/15/2004 –
09/14/2006
NIH/NCRR
Extramural Research Facilities Construction: Xavier Animal Resource Center

This project will expand the biomedical research capacity of Xavier University of Louisiana by construction of state-of-the-art animal research facility, which will support the development of independent research projects aimed at eliminating health disparities.

HEF (2001-06)-06 Harlan, R. (PI)
12/31/2006

01/01/2002-

State of Louisiana; Board of Regents
Tulane-Xavier Center for Substance Abuse Research and Prevention;
Xavier Subcontract with Tulane University
Prevention of Prescription Drug Abuse
Role: PI for Xavier Subcontract

The goals of this project are to identify use patterns of controlled substances in local community pharmacies, develop and validate assessment tools for use by clinical pharmacists to identify cases of prescription drug abuse and ultimately to develop effective patient education strategies to prevent such abuse.

D34HP00006-17-00 Harris (Project Director)
06/30/2006

07/01/2003 –

HRSA
Xavier Center of Excellence Program